



First Steps Bulletin

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Topic: Need for Service

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UPDATED POLICY & PROCEDURES

To be eligible for First Steps in Indiana, a child must meet eligibility requirements, which include:

- * A confirmed medical diagnosis by a physician which has a high probability of leading to a development delay,
- * A developmental delay of -1.5 SD or 20% in two or more areas of development,
Or
- * A developmental delay of -2 SD or 25% in one or more areas of development.

Once a child is determined eligible, the Team, comprised of the Parent, ED team members, Service Coordinator working with the family, and the primary care physician, should discuss early intervention services that will assist the family and child in meeting family driven outcomes. Services should be appropriate for the child and involve the family. In the discussion of services, it is important to remember that **there are NO guidelines requiring a % delay or standard deviation to authorize a child for a service in the program.** Services should support the developmental needs of the child, be provided by skilled interventionists, and meet the educational/informational needs of the family. The assessment will assist in determining the need for service and developmental status of the child, providing useful information when determining supports and resources to meet the family outcomes.

For example, a child who is eligible with a diagnosis of Down syndrome may not show a developmental delay on the AEPS or any other "test". However, the child may have issues with tone. In this case, it may be appropriate for the team to discuss the need for Early Intervention Services. The team should also consider the education needs of the parents and discuss services (both through First Steps and the community) that are available. When having these discussions, it is important to remember that every child and family is different and that not all children will have the same type or level of service. Therefore, it may be very appropriate for a family with a newborn to have an IFSP that has services authorized monthly. Another child with the diagnosis may have delays or needs that warrant more frequent services. At times, there may also be a need for an IFSP to be written with Service Coordination only, allowing the Service

Coordinator to identify community supports for the family and child. The key to developing any plan is to remember that each family and child is unique and the plan is a fluid document, changing as the needs for the family and child change. **Child development and outcomes drive the service; therefore, no child is entitled to a specific service. Services are authorized based on the needs of the child and family as identified by the team.**